Appl. No.: 10/737,247 Amdt. dated: May 3, 2007

Reply to Office action of: March 13, 2007

CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

PE MAS

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Signature 7.F. GALANTHA 7
Typed/Printed Name of Person

May **7** , 2007

Date

Signing Certificate

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Date: May 3, 2007

William Pohlman et al

Group Art Unit: 2838

Filed 12/15/2003

Examiner: VU, BAO Q

Serial Number: 10/737,247

From: Scottsdale, Arizona 85255

For:

APPARATUS FOR PROVIDING REGULATED POWER TO AN INTEGRATED CIRCUIT

AMENDMENT

Commissioner for Patents Mail Stop: Amendment P. O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated March 13, 2007, kindly amend this application as follows:

- 1. Amendments to the Claims are reflected in the listing of claims, which begin on page 2 of this paper.
- 2. Remarks/Arguments begin on page 5 of this paper.

Atty. Docket 1



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **Transmittal**

William Pohlman, et al.

10/737,247 12/19/2002

APPARATUS FOR PROVIDING REGULATED POWER TO AN INTEGRATED CIRCUIT

Commissioner for Patents

P. O. Box: 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified Application is:

TRANSMITTAL WITH CERTIFICATE OF MAILING **AMENDMENT RETURN POSTCARD**

X The fee has been calculated as si (Col. 1)	hown below: (Col. 2)	(Col. 3)	Other Than Sm	all Entity
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL * 18 MINUS	5 ** <u> </u>	= 0 x	\$ 18.00 =	\$
INDEPENDENT * 3 MINUS 1ST PRESENT	3 TATION OF MULTIPLE D	= 0 x DEP. CLAIMS	\$ 200.00 = \$290.00 =	\$ \$
TOTAL				\$0
If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3. If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.				

If the "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this <u>X</u> communication or credit any overpayment to Deposit Account No. 50-2494. A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. §1.16.

Any patent application processing fees under 37 C.F.R. §1.17.

Date: May , 2007

Respectfully submitted,

William Pohlman, et a

Attorney of Record - Reg. No. 24,

From: Theodore E. Galanthay Primarion, Inc.

CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

I hereby certify that I am depositing the enclosed or attached correspondence with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on May 17,

Theodore E. Galanthay

Person Mailing Paper

Telephone: (480) 575-0744